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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	042390.P5379	Total Pages (all documents)	32
	First Named Inventor or Application Identifier			
	Jerrold V. Hauck			
	Express Mail Label No.	EM560651152US		

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification <i>Total Pages</i> <input type="text" value="14"/> (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive Title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claims- Abstract of the Disclosure	7. <input type="checkbox"/> Nucleotide &/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <i>Total Sheets</i> <input type="text" value="5"/>	ACCOMPANYING APPLICATION PARTS 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior app Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other: _____ _____ _____
4. <input checked="" type="checkbox"/> Oath of Declaration <i>Total Pages</i> <input type="text" value="4"/> <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) (Note Box 5 below)<ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in prior application, see 37 CFR 1.63(d)(2) and 1.33 (b).	
5. <input type="checkbox"/> Incorporation By Reference (usable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no:	
18. CORRESPONDENCE ADDRESS NAME: Blakely, Sokoloff, Taylor & Zafman LLP ADDRESS: 12400 Wilshire Boulevard, 7th Floor CITY: Los Angeles COUNTRY: USA STATE: California TELEPHONE: (310)207-3800 ZIP: 90025-1026 FAX: (310)820-5988	

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="font-size: small; margin: 5px 0;">Note: Effective October 1, 1997 Patent fees are subject to annual revision</p>		<p><i>Complete If Known</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%;">Application Number</td><td style="width: 50%;"></td></tr> <tr><td>Filing Date</td><td></td></tr> <tr><td>First Named Inventor</td><td>Jerrold V. Hauck</td></tr> <tr><td>Group Art Unit</td><td></td></tr> <tr><td>Examiner Name</td><td></td></tr> <tr><td>Attorney Docket No.</td><td>042390.P5379</td></tr> </table>		Application Number		Filing Date		First Named Inventor	Jerrold V. Hauck	Group Art Unit		Examiner Name		Attorney Docket No.	042390.P5379
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TOTAL AMOUNT OF PAYMENT	(\$912.00)														

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																						
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees & credit any overpayments to:</p> <p>Acct # 02-2666 Acct Name Blakely Sokoloff Taylor & Zafman</p> <p><input checked="" type="checkbox"/> Charge any add'l fee required under 37 CFR 1.16 & 1.17 <input type="checkbox"/> Charge issue fee set in 37 CFR 1.18 at the mailing of the Notice of Allowance</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<h3>3 Additional Fees</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge-late filing fee 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SUBMITTED BY				COMPLETE (if applicable)	
Name	Thomas M. Coester			Reg. Number	39,637
Signature	<i>Thomas Coester</i>			Date	4/10/98
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